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Approved for use through 10/31/2002. OMB 0651-0035
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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Matthew D. Felder
Group Art Unit	
Examiner Name	
Attorney Docket Number	SIG000092

I hereby appoint:

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34,399

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Individual Name

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Matthew D. Felder

Signature

Matthew D. Felder

Date

9/25/03

NOTE:

Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.
Submit multiple forms if more than one signature is required, see below*.

☒

*Total of 1 forms are submitted.

SEND TO: Assistant Commissioner for Patents,
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PTO/SB/01 (10_00)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration
Submitted
with Initial
Filing

OR

☐ Declaration
Submitted after initial
Filing (surcharge
(37 CFR 1.16(e))
required)

Attorney Docket Number

SIG000092

First Named Inventor

Matthew D. Felder

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

OVERVOLTAGE AND BACKFLOW CURRENT PROTECTION FOR A BATTERY CHARGER

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checkign the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Applications Numbers(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119 (e), 120, or 365 (c) of any U.S. or PCT application(s) listed below.

Application Numbers(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/484,560	7/2/2003	

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DECLARATION - Utility or Design Patent Application

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Name WILLIAM W. KIDD					
Address P.O. Box 160727					
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City Austin		State TX		ZIP 78716-0727	
Country USA		Telephone (512) 263-1842		FAX (512) 263-1469	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.c. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Matthew D.			Family Name or Surname Felder		
Inventor's Signature <i>Matthew D. Felder</i>			Date 9/25/03		
Residence: City Austin		State TX	Country USA	Citizenship USA	
Mailing Address 12109 Barrel Bend					
Mailing Address					
City Austin		State TX	ZIP 78748	Country USA	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])			Family Name or Surname		
Inventor's Signature			Date		
Residence: City		State	Country	Citizenship	
Mailing Address					
Mailing Address					
City		State	ZIP	Country	
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheets(s) PTO/SB/02A attached hereto.					